### **Late Contribution Report**

## Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER San Francisco Democratic County Central Committee	Date of This Filing10/12/2018	Date Stamp	CALIFORNIA 497			
AREA CODE/PHONE NUMBER  I.D. NUMBER (if applicable) 742051  STREET ADDRESS		Report No		For Official Use Only		
		Amendment to Report No.	Page 1 of 4			
CITY San Francisco	STATE ZIP C CA 9411	(explain below)  No. of Pages 4				

#### Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/11/2018	Alison Collins for School Board San Francisco, CA 94109	☐ IND ■ COM □ OTH □ PTY □ SCC		\$1,000.00
10/11/2018	Fred Naranjo Scottsdale, AZ 85251 Memo Reference: INC:S497:34784	IND COM OTH PTY SCC	President And CEO Scarborough Insurance Agency	\$5,000.00
10/11/2018	National Union of Healthcare Workers Candidate Committee Sacramento, CA 95815  ID# 1318200	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$10,000.00

*Contributor Codes	
IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC) OTH - Other	SCC - Small Contributor Committee

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

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San Francisco Democratic County Central Committee			This Filing _	10/12/2018			FORM		
AREA CODE/PHONE NUMBER  I.D. NUMBER (if applicable) 742051  STREET ADDRESS  CITY San Francisco  STATE CA 94111		Report No.	1012181		For Official Use Only		se Only		
		Amendment to Report No.		Page 2 of 4					
			(explain below)  No. of Pages						
Late Contrib	oution(s) Receive	ed							
DATE RECEIVED	FULL INAIVIE. IVIAILING ADDRESS AND ZIF CODE OF CONTR			RIBUTOR	TOR CONTRIBUTOR ENTER OCCUPATION A (IF SELF-EMPLOYED, ENTER NA		D EMPLOYER AMOUNT		
10/11/2018	San Francisco Laborer' San Francisco, CA 941 ID# 981076				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			\$5,000.00	)

 $\square$  IND COM OTH  $\square$  PTY □ scc COM OTH ☐ PTY  $\square$  scc

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				Amendment to Report No			Page 3 of 4			
				No. of Pages	4					
Late Contr	ibution(s) Made									
DATE MADE		ING ADDRESS AND ZIP CODE OF RECIPI OMMITTEE, ALSO ENTER I.D. NUMBER)	IENT		ATE AND OFFICE OR AND JURISDICTIC	Ν	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)		

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Memo Reference: INC:S497:34784					
Memo Reference: INC:S497:34784 Contribution earmarked and received through ActBlue 14 Arrow Street, Suite 11 Cambridge, MA 02138. PAC limit not affected.					